

**MARYLAND COMMISSION ON KIDNEY DISEASE  
OPEN SESSION MEETING MINUTES  
Thursday April 27, 2006  
4201 Patterson Avenue, Room 108-109**

The Open Session meeting of the Commission on Kidney Disease was held on Thursday, April 27, 2006 in Room 109, 4201 Patterson Avenue. The Chairman, Dr. Jeffrey Fink, called the meeting to order at 2:08 PM. Commission members present were: Drs. Kenneth Ylm, Dean Taylor, Roland Einhorn, Ms. Anne-Marie Gregory, Mrs. Tracey Mooney and Mrs. Margery Pozefsky. Commission staff present were: Leslie Schulman, AAG, Commission Counsel, and Donna Adcock, RN, Surveyor.

**DHMH staff present:** Carol Manning, Chief KDP, Pat Nowakowski, Dee Spanos, RN, Medicaid Operations, Barbara Fagan and Anne Piluk, Office of Health Care Quality.

**Guests present were:**

Betty Grandison, Davita	Robert Rauch, Amgen
Micki Misiaszek, Genzyme	Bobbie Bonhage, NKF
Kevin Holst, Care Improvement Plus	Shannon Green, Community Dialysis
Joan Rogers, IDF	Bill Frederick, Holy Cross
Juathawala Harris, Liberty Dialysis	Bob Ward, FMC
Judy Thomas, FMC	Douglas Brooks, Good Samaritan
Timah Ricketts, Deer's Head Center	Kathryn Reed, Deer's Head Center
Christina Choi, American Access	Laura Kirby, UMMS
Debora Evans, UMMS	Susan Leon, Bon Secours
Jide Salako, FMC	Heather Gould, Bon Secours

**I. APPROVAL OF JANUARY 26, 2005 MINUTES**

The Commission approved the Open Session minutes as submitted.

**II. CHAIRMAN'S REPORT**

• **Transplant Committee**

Dr. Fink reported that he is pleased with the transplant committee's outcomes. The committee is planning a seminar to address communication issues between transplant centers and dialysis facilities. The seminar will be held on October 3<sup>rd</sup> at the UMBC Technology Center. Each facility should send their transplant liaison. The committee hopes to improve communication between the entities and improve access to care for the patients.

**III. OLD BUSINESS**

**A. Amendments to COMAR – Final Regulations**

Dr. Fink announced that the amendments to COMAR were final on April 24, 2006. Mrs. Adcock reported that new regulation booklets would be distributed later in the year, in the interim; the amendments may be found online or requested from the Commission office.

**IV. NEW BUSINESS**

**A. Kidney Disease Program- Statistics and Budget**

Ms. Manning presented and discussed the KDP Budget, Statistics, and Expenditure Reports. She reported that although the unexpended balance for this fiscal year is only \$415,994 that the Program will be able to pay for services until the end of the fiscal year. She noted that the Program is still working on electronic claims.

- **Prosource**

Ms. Manning reported that Prosource is not a rebatable product and therefore KDP is unable to pay for this supplement. She noted that the few requests made for the product were for a liquid form which is not available. She reported that Procel and Boost Plus are still available on the formulary.

- **New Legislation – HB 697**

Ms. Nowakowski reported that HB 697 passed and will require KDP recipients to join Medicare Part D or have comparable coverage. The KDP recipients must enroll, by the next enrollment period, which is November 15 through December 30, for the Medicare Part D coverage to be effective on January 1, 2007.

She noted that recipients that apply for Medicare Part D will be able to have coverage for drugs not included in the KDP formulary and that KDP will pay any deductibles and coinsurance for drugs covered by KDP. She requested that the group make patients aware that they must apply and be covered by January 1, 2007.

Ms. Nowakowski reported that KDP will send out a letter to all KDP recipients to notify them of the requirement. The recipients will have to pay the Medicare Part D premiums. She noted that the online Medicare Part D tool is very helpful.

**B. Avian Flu – Richard Reichess**

Mr. Reichess, a social worker at the J.B. Zachary Dialysis unit, discussed pandemic influenza which may occur in the next 5-10 years. He reported on its possible effect on the renal community which includes very vulnerable patients. He questioned how we as a community should plan for a pandemic and noted that the community should be planning for such an event. He noted that a pandemic would be devastating on many levels and that we should be working with local health departments to plan for speedy and effective intervention when such a pandemic occurs. He reported that the preparedness is abysmal at this time and feels that this is the time to respond. Mr. Reichess suggested forming a task force. He noted that Maryland does have a plan in place which is available online.

Dr. Fink noted that a more generalized preparedness plan may be more appropriate.

**C. Care Improvement Plus – Kevin Holst**

Mr. Holst, Vice President of Care Improvement Plus, presented the plan which is a Medicare Advantage Plan focused on chronic illness. The plan is available in Baltimore City and 8 surrounding counties. Eligibility requirements were reviewed. The plan enrolls 365 days per year; it pays 100% of Medicare rates and provides a support team to assist patients in care coordination.

**D. Home Hemodialysis Guidelines**

Mrs. Adcock reported that the guidelines were developed in response to the growing number of facilities starting home hemodialysis programs and the renewed interest in the modality. The guidelines will be posted on the Commission website, provided to the Office of Health Care Quality and mailed to any facility that is licensed to train patients for home hemodialysis.

Joan Parrish from the Mid-Atlantic Renal Network reports that less than 2% of the Network population were participating in home hemodialysis.

**E. Commission Legislative Audit Disclosure**

Mrs. Adcock reported that this disclosure is the Commission's assertion that we have cooperated in good faith with the legislative auditors.

#### F. Change of Ownership

Dr. Fink reported that Maryland Kidney Care sold the N. Charles and Arnold facilities to DCA.

#### G. Complaints

Mrs. Adcock reported that the Commission has received and investigated the following types of complaints since the last meeting:

##### Written

- Facility complaint regarding a non-compliant patient
- Facility complaint regarding a threatening patient
- Complaint regarding facility's handling of power outage during dialysis

##### Verbal

- Patient complaint regarding staffing at a facility

#### H. Citation Free Surveys

Dr. Fink commended the Davita Whitesquare and FMC Whitemarsh facilities for having citation free surveys.

#### I. Surveys (22)

The Commissioners reviewed the results of the surveys and the deficiencies noted:

##### Deficiencies

Compliance with Federal, State and Local Laws and Regulations	0
Governing Body and Management	6
Medical Supervision	0
Long Term Program and Care Plan	13
Patient Rights/Responsibilities	9
Medical Records	11
Physical Environment	8
Transmissible Diseases	2
Reuse	1
Affiliation Agreements	0
Director of Dialysis Center	1
Staff of a Renal Dialysis Facility	7
Minimal Service Requirements	6
Transplant Centers/ Affiliation Agreement	0
Abusive and Dangerous Patients	0

Dr. Fink noted continued non-compliance in the areas of Medical Records, Long Term Program and Care Plans. Mrs. Adcock noted that Patient's Rights and Responsibility citations have increased because during the survey interview process the patients are stating that they are not aware of the facility's grievance procedures. Mrs. Adcock suggested that facilities may want to review this information periodically with the patients.

Ms. Piluk reported that she just attended a CMS conference which discussed the Long Term Program and Care Plan requirements. She noted that there must be a conference including the interdisciplinary team and the patient must be involved. Passing care plans from person to person does not meet the requirement.

**J. Surveys Completed (22)**

The following facilities have been surveyed since the last meeting:

Davita Harbor Park  
Montgomery Renal  
Ultimate Renal Care  
Porter White Marsh  
MKC Arnold  
FMC Camp Springs  
Davita Bel Air  
IDF Arundel  
Robinwood  
Davita Chestertown  
FMC Ft. Washington

Davita Pikesville  
Davita Falls Rd.  
FMC Porter Pikesville  
Davita Wheaton  
DCA West Baltimore  
Davita Renal Care Bowie  
Davita Whitesquare  
Artificial Kidney Silver Spring  
Davita Harford Road  
FMC Ft. Foote  
Davita Renal Care Takoma

**Percent of Surveyed Facilities Meeting MARC's Anemia, Adequacy and Fistula First Goals**

GOAL		Q1	Q2	Q3	Q4
ANEMIA	Hgb $\geq$ 11	86%			
ADEQUACY	URR $\geq$ 65/Kt/v $\geq$ 1.2	68%			
FISTULAS	40%	28.5%			
FISTULAS	50%	9%			

Mrs. Adcock noted that the Commission will be reviewing the surveyed facilities' progress toward meeting these Network goals. She noted that the fistula goal is 50% but the outcome this quarter was so low that she wanted to also compare the facilities meeting initiative at 40%.

**CLOSED SESSION:** Pursuant to Maryland State Government Annotated "10-508, on a motion made by Dr. Jeffrey Fink and seconded by Dr. Roland Einhorn, the Commission unanimously voted to close its meeting on April 27, 2005 at 3:05 p.m., in room 108-109 for the purpose of complying with the Maryland Medical Practice Act that prevents public disclosures about particular proceedings or matters.